

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

IA ETHICS AND CAMPAIGN DISCLOSURE BOARD  
PM 1-15-08  
2008 JAN 16 AM 9:33

**COMMITTEE NAME** (Must be same as on Statement of Organization)

MARY JURENKA FOR SCHOOL BOARD

IMPORTANT: Indicate by # type of committee you are reporting for: 7

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

MARY JURENKA

Political Party (if applicable)

Office Sought

SCHOOL BOARD

District (if Senate or House)

<b>FORM DR-2</b> (Rev. 07/2007)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	11224
Logged in	
Scanned	
Computer	SM
Audited	

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

James P. Jurenka

SIGNATURE OF PERSON FILING REPORT

292-9145

TELEPHONE

1-14-08

DATE SIGNED

I AM FILING A JANUARY 2008 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.  
(report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 803.57

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

262.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 1,065.57

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

1,044.86

Schedule F: Loan Repayments total (Attach Schedule F)

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$ 20.71

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$

**\*\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 111.45

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

YES ☒ NO

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

## EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

MARY JURENKA For SCHOOL BOARD

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/5/07	ID# CK# 1005	JET PRINT 301 MAIN ST AMES IA 50010	INVOICE # 74703 Brochures	\$ 82.21
9/5/07	ID# CK# 1006	JET PRINT 301 MAIN ST AMES IA 50010	INVOICE # 74708 POST CARDS	96.26
9/5/07	ID# CK# 1007	U.S. POST OFFICE 525 KELLOGG AVE. AMES, IA 50010	POSTAGE STAMPS	520. <sup>00</sup>
9/7/07	ID# CK# 1008	TERESA ROSENBERG 811 RIDGEMOND AMES, IA 50010	REIMBURSEMENT for POSTAGE STAMPS	130. <sup>00</sup>
9/18/07	ID# CK# 1009	HELEN GUNDERSON P.O. Box 704 AMES, IA 50010	PHOTOGRAPHY for BROCHURE	50. <sup>00</sup>
10/2/07	ID# CK# 1010	MARY JURENKA 826 8th ST. AMES IA 50010	REIMBURSEMENT for BROCHURE PRINTING, JET PRINT INVOICE # 76613	166.39
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1,044.86
TOTAL (if last page of this schedule)				\$ 1,044.86

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

Revised Form

SCHEDULE <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

MARY JURENKA for SCHOOL BOARD

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
9/5/07	ID# CK#	UNITEMIZED 1 to 5 SEPT.	—	\$ 70.00	<input type="checkbox"/>
9/18/07	ID# CK#	HOLLY FUCHS 806 BROOKRIDGE AMES, IA 50010	—	100.00	<input type="checkbox"/>
9/18/07	ID# CK#	UNITEMIZED 9/18/07		25.00	<input type="checkbox"/>
10/2/07	ID# CK#	JAMES PRITCHARD 1206 ORCHARD DRIVE AMES IA 50010		67.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 262.00	
TOTAL (if last page of this schedule)				\$ 262.00	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

MARY JURENKA R- SCHOOL BOARD

Revised Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND  
CONTRIBUTIONS

☐ CHECK THIS BOX IF  
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
9/1/07	JIM POPKEN 920 CLARK AVE AMES IA 50010	—	VOTER LIST	\$ 15.00	<input type="checkbox"/>
9/5/07	JAMES PRITCHARD 1206 ORCHARD DR AMES IA 50010	—	POSTAGE STAMPS	84.50	<input type="checkbox"/>
9/5/07	JAMES PRITCHARD 1206 ORCHARD DR AMES IA 50010		THANK-YOU CARDS!	11.95	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL

\$ 111.45

TOTAL (if last  
page of this  
schedule)

\$ 111.45

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule E)